## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

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7590 09/12/2005 Michael C. Barrett FULBRIGHT & JAWORSKI LLP 600 Congress Avenue Suite 2400		DEC 15	Depers. Each additionary its own certificate  Certificate Service v. Carrier of the Main transmitted to the USP	tificate of Mailing or Trans is Fee(s) Transmittal is being with sufficient postage for fir I Stop ISSUE FEE address TO (571) 273-2885, on the co	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
Austin, TX 78701		(Inpr	Michael C.	narrett 1	(Depositor's name)	
			Michle C.K	<u> </u>	(Signature)	
			December 1	2, 2005	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/080,272	02/21/2002	Sergey M.	Dzekunov	20261-0630	6969	
			ATION OF BIOLOGICAL SAI			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	\$300	\$1000	12/12/2005	
EXAMINER AR		· ART UNIT	CLASS-SUBCILASS 127	6/2005 BABRAHA2 0000		
KETTER, JAMES S		1636	435-461000 <b>01</b>	C:2501 C:1504	700.00 QP 300.00 QP	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.    Fulbright & Jaworski L.			
		E PRINTED ON THE PATEN				
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be in 37 CFR 3.11. Completion	elow, no assignee data will app of this form is NOT a substitute	pear on the patent. If an assign for filing an assignment.	ee is identified below, the d	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
MAXCYTE, Inc	1.1.14	Gai	thersburg, MD (U	.S.A.)		
Please check the appropriate	e assignee category or catego	ries (will not be printed on the	patent):	orporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:	4b. Payment of	` '			
Issue Fee			A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.						

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Michel G. B December 12,2005 Authorized Signature Date 44,523 Michael C. Barrett Registration No. Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Advance Order - # of Copies

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1212 (enclose an extra copy of this form).

inadvertently omitted or is insufficient.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).